

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Sandra B. Northam
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # K68703

(3)

1. Corporation Name:

NATIONWIDE MAGAZINE SERVICES, INC.

Principal Place of Business

10900 ENDEAVOR WAY, #C
LARGO FL 34647

Mailing Address

10900 ENDEAVOR WAY, #C
LARGO FL 34647

APPROVED
AND
FILED

95 JUL -5 AM 9:00

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

02/27/1989

3a. Date of Last Report

11/14/1994

4. FEI Number

59-2933221

Applied For
Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing

☐

\$5.00 May Be
Added to Fees

6. This corporation has liability for intangible tax under S. 199.032,
Florida Statutes ☐ Yes ☐ No

2. Principal Place of Business

21

State, Apt. #, etc.

2a. Mailing Address

26

State, Apt. #, etc.

22

City & State

27

City & State

23

Zip

County

28

Zip

County

24

9. Name and Address of Current Registered Agent

ENGLANDER & FISCHER, P.A.
5959 CENTRAL AVENUE
STE. 201
ST. PETERSBURG FL 33710

10. Name and Address of New Registered Agent

81. Name

82. Street Address (P.O. Box Number is Not Acceptable)

83.

84. City

FL

85. Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1505, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Agent's Name (Print Name of Registered Agent and the Filing Date)

86. Registered Agent Signature Required when Necessary

Date

12. OFFICERS AND DIRECTORS

TITLE	NAME	STREET ADDRESS	CITY, ST, ZIP
DP	MCNETT, DAVID L.	11719 TRADEWINDS BLVD N.	SEMINOLE FL
DTS	STOVER, DAVID R.	11563 HARBORSIDE CIR N.	SEMINOLE FL

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1. TITLE	2. NAME	3. STREET ADDRESS	4. CITY, ST, ZIP	Change	Addition
				☐	☐
				☐	☐
				☐	☐
				☐	☐
				☐	☐
				☐	☐
				☐	☐

14. I, the undersigned, certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.02(2)(b), Florida Statutes. I further certify that the information included on this annual report or supplementary annual report is true and accurate and that my signature shall have the same legal effect as if made under oath. I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes, and that my name appears in Block 12 or Block 13 (if changed), or as an appointment with an address.

SIGNATURE:

David Stover

DAVID STOVER

JUNE 1, 1995

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

FILED